

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Defend Louisiana PAC
FEC IDENTIFICATION NUMBER C C00616128
Check if [x] 24-hour report [] 48-hour report [x] New report [] Amends report filed on

Full Name of Payee BOLD
Mailing Address 1746 Jackson Ave
City New Orleans State LA Zip Code 70115
Purpose of Expenditure Community outreach/Canvassing Category/Type 004
Name of Federal Candidate CAMPBELL, FOSTER LONNIE II, , Support
Office Sought: [] House District: 00 [] President [x] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 147893.93
Disbursement For: [] Primary [x] General 2016 [] Other (specify)

Full Name of Payee BOLD
Mailing Address 1746 Jackson Ave
City New Orleans State LA Zip Code 70115
Purpose of Expenditure Postage Category/Type 004
Name of Federal Candidate CAMPBELL, FOSTER LONNIE II, , Support
Office Sought: [] House District: 00 [] President [x] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 116293.93
Disbursement For: [] Primary [x] General 2016 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 26700.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Townsend, Taylor, , , [Electronically Filed] Date 10 / 22 / 2016
Signature

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Check if [x] 24-hour report [] 48-hour report [x] New report [] Amends report filed on

Full Name of Payee BOLD
Mailing Address 1746 Jackson Ave
City New Orleans State LA Zip Code 70115
Purpose of Expenditure Printing Category/Type 004
Date of Public Distribution/Dissemination 10/22/2016
Amount 21600.00
Transaction ID : SE.4280
Date of Disbursement or Obligation 10/22/2016
Name of Federal Candidate CAMPBELL, FOSTER LONNIE II, , Support
Office Sought: [] House District: 00 [] President [x] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 141893.93
Disbursement For: [] Primary [x] General 2016 [] Other (specify)

Full Name of Payee OPDEC/ Mele Printing
Mailing Address 5801 Waterford Blvd
City New Orleans State LA Zip Code 70127
Purpose of Expenditure Printing Category/Type 004
Date of Public Distribution/Dissemination 10/22/2016
Amount 25000.00
Transaction ID : SE.4281
Date of Disbursement or Obligation 10/22/2016
Name of Federal Candidate CAMPBELL, FOSTER LONNIE II, , Support
Office Sought: [] House District: 00 [] President [x] Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 172893.93
Disbursement For: [] Primary [x] General 2016 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 46600.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FEC IDENTIFICATION NUMBER C C00616128
Check if [x] 24-hour report [] 48-hour report [x] New report [] Amends report filed on

Full Name of Payee TIPS
Mailing Address 1517 Harrison Ave.
City New Orleans State LA Zip Code 70119
Purpose of Expenditure Community outreach/Canvassing Category/Type 004
Name of Federal Candidate CAMPBELL, FOSTER LONNIE II, , , [x] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought 120293.93

Date of Public Distribution/Dissemination 10 / 22 / 2016
Amount 4000.00
Transaction ID : SE.4274
Date of Disbursement or Obligation 10 / 22 / 2016
Office Sought: [] House District: 00 [] President [x] Senate State: LA
Disbursement For: [] Primary [x] General 2016 [] Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Name of Federal Candidate [] Support [] Oppose
Calendar Year-To-Date Per Election for Office Sought

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Office Sought: [] House District: [] President [] Senate State: []
Disbursement For: [] Primary [] General [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 4000.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 77300.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Townsend, Taylor, , , [Electronically Filed] Date 10 / 22 / 2016
Signature